

31832
TXD 008063661
25

TEXAS DEPARTMENT OF WATER RESOURCES

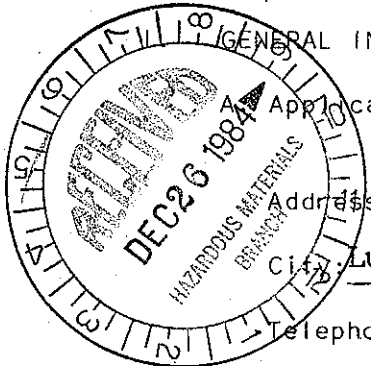
PERMIT APPLICATION
FOR
INDUSTRIAL SOLID WASTE STORAGE/PROCESSING/DISPOSAL FACILITY

PART A - FACILITY BACKGROUND INFORMATION

APPL. NO.	30253
COUNTY-DIST.	Angelina 6
PERMIT NO.	
DATE OF REVIEW BY	OKB
DATE OF REVIEW	
COPIES SENT:	(CHECK)
DIST-6	✓

ACTIVE
#087299

existing
Data 4/25/8



GENERAL INFORMATION

Applicant: Lufkin Creosoting Co., Inc.

(Individual, Corporation, or Other Legal Entity, Name)

Address: P. O. Box 1207

City: Lufkin State: Texas Zip Code: 75901

Telephone Number: 713/634-4923

B. Authorized Agents

1. List those persons or firms authorized to act for the applicant during the processing of the permit application. Also indicate the capacity in which each person may represent the applicant (engineering, legal, etc.). The person listed first will be the primary recipient of correspondence regarding this application. Include the complete mailing addresses and phone numbers.

Danny Vines - Engineering
P. O. Box 1207
Lufkin, Texas 75901
713/634-5075

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2. List the individual and his/her mailing address that will be responsible for causing any necessary public notices to be published in the newspaper.

Name: Danny Vines

Address: P. O. Box 1207

City: Lufkin State: Texas Zip Code: 75901

Telephone Number: 713/634-5075

31832

TEXAS DEPARTMENT OF WATER RESOURCES

PERMIT APPLICATION
FOR
INDUSTRIAL SOLID WASTE STORAGE/PROCESSING/DISPOSAL

PART A - FACILITY BACKGROUND INFORMATION

APPL. NO.	30253
COUNTY-DIST.	Angelina 6
PERMIT ACKNOWLEDGED	
ADL. REVIEW BY	JKB
ADMINISTRATIVE COMPLETE	
COPIES SENT:	(CHECK)
DIST-6	<input checked="" type="checkbox"/>

ACTIVE
#087299

existing
4/25/83

I. GENERAL INFORMATION

A. Applicant: Lufkin Creosoting Co., Inc.

(Individual, Corporation, or Other Legal Entity, Name)

Address: P. O. Box 1207

City: Lufkin State: Texas Zip Code: 75901

Telephone Number: 713/634-4923

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1. List those persons or firms authorized to act for the applicant during the processing of the permit application. Also indicate the capacity in which each person may represent the applicant (engineering, legal, etc.). The person listed first will be the primary recipient of correspondence regarding this application. Include the complete mailing addresses and phone numbers.

Danny Vines - Engineering
P. O. Box 1207
Lufkin, Texas 75901
713/634-5075

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2. List the individual and his/her mailing address that will be responsible for causing any necessary public notices to be published in the newspaper.

Name: Danny Vines

Address: P. O. Box 1207

City: Lufkin State: Texas Zip Code: 75901

Telephone Number: 713/634-5075

3. List the applicant's registered agent for service.

Name: Danny Vines

Address: P. O. Box 1207

City: Lufkin State: Texas Zip Code: 75901

Telephone Number: 713/634-5075

C. Operator: Identify the entity who will conduct facility operations.
If same as applicant, state "same as applicant."

Name: Same as applicant

Address: Same as applicant

City: _____ State: _____ Zip Code: _____

Telephone Number: _____

D. Ownership

1. Indicate the ownership status of the facility:

a. Private X

- | | |
|-----------------------------|----------|
| (1) Corporation | <u>X</u> |
| (2) Partnership | _____ |
| (3) Proprietorship | _____ |
| (4) Non-profit organization | _____ |

b. Public _____

- | | |
|---------------|-------|
| (1) Federal | _____ |
| (2) Military | _____ |
| (3) State | _____ |
| (4) Regional | _____ |
| (5) County | _____ |
| (6) Municipal | _____ |

c. Other (specify) _____

2. Is facility and site property owned by applicant?

X Yes _____ No

If you checked "no",

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- a. Submit as an attachment a copy of the lease for use of said facility and/or site property, as appropriate; and
- b. Identify the facility and/or site property owner. If same as applicant in Part A above, state "same as applicant." If different from the applicant, please note that the owner is required to sign the application on page 5.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____

E. Type of Permit Application:

1. New X
2. Amendment (TDWR Permit Number: _____)

F. Registration and Permit Information

1. Denote your TDWR Solid Waste Registration Number. If none, state "none." TDWR Reg No. 31832
WCC - 151230

2. Indicate (by listing the permit number(s) in the right-hand column below) all existing or pending State and/or Federal permits or construction approvals which pertain to pollution control or industrial solid waste management activities conducted by your plant or at your location. Complete each blank by entering the permit number, or the date of application, or "none".

Relevant Program and/or Law

	<u>Permit No.</u>	<u>Government Agency*</u>
a. Texas Solid Waste Disposal Act	_____	_____
b. Wastewater disposal under the Texas Water Code	_____	_____
c. Underground injection under the Texas Water Code	_____	_____
d. Texas Clean Air Act	<u>8262</u>	<u>TACB</u>
e. Texas Uranium Surface Mining & Reclamation Act	_____	_____
f. Texas Surface Coal Mining & Reclamation Act	_____	_____
g. Hazardous Waste Management program under the Resource Conservation and Recovery Act	_____	_____

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- h. UIC program under the Safe Drinking Water Act
- i. NPDES program under the Clean Water Act
- j. PSD program under the Clean Air Act
- k. Nonattainment program under the Clean Air Act
- l. National Emission Standards for Hazardous Pollutants (NESHAPS) preconstruction approval under the Clean Air Act
- m. Ocean dumping permits under the Marine Protection Research and Sanctuaries Act
- n. Dredge or fill permits under section 404 of the Clean Water Act
- o. Other relevant environmental permits

-TXD008063661 E.P.A.

* Use the following acronyms for each agency as shown below:

TDWR = Texas Department of Water Resources
TACB = Texas Air Control Board
TRC = Texas Railroad Commission
TDH = Texas Department of Health
TDA = Texas Department of Agriculture
EPA = U. S. Environmental Protection Agency
CORPS = U. S. Army Corps of Engineers

G. Description of Business

1. Give a brief description of the nature of your business.

Wood treating business

We are a three cylinder plant which uses only #1 grade coal tar creosote.

2. List the principal products and/or services which are provided by your plant. Please itemize by Standard Industrial Classification (SIC) codes.

Poles, Piling, Posts, Lumber, Bridge Timbers

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I, Danny Vines (Name), Vice President (Title)

I, _____ (Name), _____ (Title)

Certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete.

Signature: Danny Vines, Date: 3-25-83
Signature: _____, Date: _____

SUBSCRIBED AND SWORN to before me by the said Danny Vines
_____ on this 25th day of March, 19 83.
My commission expires on the 21st day of January, 19 84.

Joyce Hunsheeler
Notary Public in and for

Angelina County, Texas

TEXAS DEPARTMENT OF WATER RESOURCES
AUSTIN, TEXAS

Receipt No. 83- 3692

Date 4/18/83
Received From Luffkin Creosoting Co., Inc.
Address Luffkin, TX For _____

Amount 5.00

G.R. Fd. 001, Unappr. CC 09644
G.R. Fd. 001, Appr. CC _____
Spec. Fd. 041 FY CC _____
Spec. Fd. 153 FY 83 CC 11371 5.00
Spec. Fd. 158 FY CC _____
Spec. Fd. _____ FY CC _____

Suspense Fd. 900 CC 09642
Filing Fee _____
Recording _____
Use Fee _____
Storage _____
Postage _____

Comptr. Rev Code 3754 TDWR Rev Code _____

Type of Fee or Revenue Waste Discharge Permit - Postage

Type of Remittance CR # 7563 Received by MW

II. SITE BACKGROUND INFORMATION

A. Location of Site **six miles south of Lufkin on Highway 69 South**

1. Facility Name: **Lufkin Creosoting Co., Inc.**

Street Address, if available: Highway 69 South , Lufkin, Tx.

County: Angelina

2. Are your waste management operations within the extraterritorial jurisdiction of a municipality?

Yes **X** No

If you checked "yes," what municipality? _____

3. Give a verbal description of the location of the facility site with respect to known or easily identifiable landmarks.

Just North of Lufkin Livestock Exchange

4. Detail the access routes from the nearest U.S. or State Highway to the facility site.

North side of Hwy. 69 South take a right just past Lufkin
Livestock Exchange, travel 1/4 mile, plant located on right

5. Submit as "Attachment A" a United States Geological Survey (USGS), 7½ minute quadrangle map. Indicate on this map the location of the site and the land use patterns of the areas within 1 mile (1.6 km) of the site boundaries (e.g., residential, commercial, recreational, agricultural, undeveloped, etc.). Each area of land use should be labeled on the map. (Note: if such a map is not available, submit a substitute map such as a State Department of Highways and Public Transportation county map or a city map with sufficient scale to adequately show the site location and surrounding land use patterns.

6. a. Submit as "Attachment B" a map indicating the boundaries of all adjacent parcels of land, and a list of the names and mailing addresses of all adjacent landowners and other nearby landowners who might consider themselves affected by the activities described by this application. Cross-reference this list to the map through the use of appropriate keying techniques. The map should be a USGS map, a city or county plat, or another map, sketch or drawing with a scale adequate enough to show the cross-referenced affected landowners.

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- b. Indicate from what source(s) the names and addresses of persons identified as affected were obtained.

City _____
County _____
School District _____
Water District _____
Abstract Co. _____
Other (specify) _____

7. Enter the geographical coordinates of the site:

Latitude: 31 deg 17 min 20 sec

Longitude: 94 deg 38 min 5 sec

8. Is the facility located on Indian lands? Check one:

____ Yes X No

B. Legal Description of Site

Submit as "Attachment C" a legal description(s) of the tract or tracts of land upon which the waste management operations referred to in this permit application occur or will occur. Although a legal description is required, a metes and bounds description is not necessary for urban sites with appropriate "lot" description(s).

C. Site Environmental and Technical Information

1. Climatic and Hydrologic

- a. Is any portion of your waste management facility site (including proposed, active, and inactive portions) subject to flooding from adjacent or nearby surface water bodies under the following conditions?

24-hr Rainfall Event	Yes	No
25-year	_____	<u>X</u>
50-year	_____	<u>X</u>
100-year	_____	<u>X</u>

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- b. Are there any producing groundwater wells on your site property?

____ Yes X No

If you checked "yes,"

(1) Indicate the number of such wells: _____, and

(2) Indicate the corresponding water uses below:

(a) Industrial uses:

Cooling water _____

Process water _____

Fire-control water _____

(b) Potable (drinking) water _____

(c) Agricultural uses:

Irrigation water for livestock food crops or grazing
land _____

Livestock watering _____

Irrigation water for human food crops _____

c. Are any adjacent or nearby surface waters utilized by the
applicant?

_____ Yes X No

If you checked "yes," indicate the corresponding water uses
below:

(1) Industrial uses:

Cooling water _____

Process water _____

Fire-control water _____

(2) Potable (drinking) water _____

(3) Agricultural uses:

Irrigation water for livestock food crops or grazing
land _____

Livestock watering _____

Irrigation water for human food crops _____

2. Site Land Use and Subsidence Information

a. Is any portion of the overall site property utilized for
agricultural purposes?

_____ Yes X No

If you checked "yes," indicate the corresponding uses below:

(1) Grazing _____

(2) Livestock food crop _____

(3) Human food crop _____

If you checked no. (2) or (3), specify the types of crops
grown. _____

b. Is any portion of the overall site property subject to land
subsidence?

_____ Yes X No

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If you checked "yes," estimate the magnitude of the greatest subsidence that has occurred (in units of feet). _____

III. WASTES AND WASTE MANAGEMENT

A. Waste Generation and Management Activities

Is any hazardous industrial solid waste (see Title 40, Code of Federal Regulations, Part 261) presently or proposed to be generated at your facility?

___ Yes X No

If you checked "no," go to Section III.B.2. below.

If you checked "yes," answer the following question.

1. Are you presently registered with TDWR as a solid waste generator?

___ Yes ___ No

If you checked "no," contact the Solid Waste Section of TDWR in Austin, Texas to obtain registration information. Also, continue with the application form (go to Number 2 below).

If you checked "yes," go to Section I of your Notice of Registration, determine which of your wastes are hazardous, and list these wastes (and mixtures) in Table III-1 (see Number 2 below).

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2. Complete Table III-1 below, listing all hazardous wastes and all mixtures containing any hazardous waste which are presently or proposed to be generated at your facility. (see 40 CFR 261), attaching additional copies as necessary.

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In this table, "TDWR Sequence Number" refers to the number in the left-hand column in Section I of your Notice of Registration (Note: if you are not registered with TDWR, enter "NA" for TDWR Sequence Number and TDWR Waste Code Number).

For the EPA Hazard Code and EPA Hazardous Waste Numbers, see 40 CFR 261.20-33. For annual quantity, provide the amount in units of pounds (as generated) for each waste and/or waste mixture.

Please group the listings of wastes by SIC code, insofar as your processes are designated by SIC codings. Also, within the general SIC code groups, give a brief description of the specific process or operation from which the waste has been generated.

B. Waste Management Facilities Summary

1. For each waste and waste mixture listed in Table III-1 that is presently or proposed to be stored on-site for longer than 90 days (see TDWR Rule 156.22.06.009), "processed" on-site [see TDWR Rule 156.22.04.002(a)(53)], or disposed on-site, provide the summary sheet shown in Table III-2 (Note: you must make copies of Table III-2 and submit the completed set of tables as "Attachment D").

SIC Code and Process

Table III-1 Generated Hazardous Wastes and Management Activities[illegible]

¹ "Storage" means the interim containment or control of waste after generation and prior to ultimate disposal.

² "Processing" means the extraction of materials, transfer, volume reduction, conversion to energy, or other separation and preparation of solid waste for reuse or disposal, including the treatment or neutralization of hazardous waste so as to render such waste nonhazardous, safer for transport, amenable for recovery, amenable for storage, or reduced volume. The "transfer" of solid waste for reuse or disposal as used above, does not include the actions of a carrier in conveying or transporting solid waste by truck, ship, pipeline, or other means.

Table III-2 Hazardous Waste Management Facility Component Summary Sheet

Verbal Description of Waste	<u>Creosote Tank Bottoms</u>
Process (see last column in Table III-1)	<u>151230</u>
TDWR Sequence Number of Waste (if assigned)	<u>02</u>

Indicate the facility components used for storage/processing/disposal of the above-specified waste by entering the number of such facility components by which this waste is managed.

<input type="checkbox"/> Lagoon/Pond (unlined)	<input type="checkbox"/> Landfarm
<input type="checkbox"/> Lagoon/Pond (lined)	<input type="checkbox"/> Landspreading Area
<input type="checkbox"/> Basin (earthen, above-grade lined)	<input type="checkbox"/> Spray Irrigation Area
<input type="checkbox"/> Basin (earthen, above-grade unlined)	<input type="checkbox"/> Flood Irrigation Area
<input type="checkbox"/> Basin (earthen, below-grade lined)	<input type="checkbox"/> Septic Tank/Drain Field
<input checked="" type="checkbox"/> Basin (earthen, below-grade unlined)	<input type="checkbox"/> Injection Well
<input type="checkbox"/> Basin (concrete, above-grade lined)	<input type="checkbox"/> Tank (surface storage)
<input type="checkbox"/> Basin (concrete, above-grade unlined)	<input type="checkbox"/> Tank (sub-surface storage)
<input type="checkbox"/> Basin (concrete, below-grade lined)	<input checked="" type="checkbox"/> Tank (surface processing)
<input type="checkbox"/> Basin (concrete, below-grade unlined)	<input type="checkbox"/> Tank (sub-surface processing)
<input type="checkbox"/> Basin (other)	<input type="checkbox"/> Tank (other)
<input checked="" type="checkbox"/> Pit (lined)	<input type="checkbox"/> Drum Storage Area (open)
<input type="checkbox"/> Pit (unlined)	<input type="checkbox"/> Drum Storage Area (enclosed)
<input type="checkbox"/> Incinerator	<input type="checkbox"/> Drum Storage Area (other)
<input type="checkbox"/> Open Controlled Incineration Area	<input type="checkbox"/> Bulk Storage Area (open)
<input type="checkbox"/> Boiler (energy-producing)	<input type="checkbox"/> Bulk Storage Area (enclosed)
<input type="checkbox"/> Landfill (sanitary)	<input type="checkbox"/> Bulk Storage Area (other)
<input type="checkbox"/> Landfill (surface, open)	<input type="checkbox"/> Other (specify _____)
<input type="checkbox"/> Landfill (other)	

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2. Has the applicant at any time conducted the on-site disposal of industrial solid waste now identified or listed as hazardous waste?

_____ Yes X No

If you checked "yes," complete Table III-3 indicating the hazardous industrial solid waste management facility components which were once utilized at your plant site but are no longer in service (i.e., inactive facility components).

If you checked "no," and if no hazardous industrial solid waste is presently or proposed to be stored [for longer than 90 days (see TDWR Rule 156.22.06.009)], processed, or disposed of at your facility, then you need not file this permit application. Otherwise, proceed with application form.

3. For each facility component indicated in Table III-2 (Attachment D) and Table III-3, complete the following Table III-4 attaching additional copies as necessary. Enter the name of each facility component as specified in the earlier tables.

Give the design capacity of each facility component in any of the units shown. In the case of inactive facilities for which design details are unavailable, an estimate of the design capacity is sufficient.

Please note that each facility component should be described in your own words on the line provided for "verbal description."

4. Provide an estimate of the total weight (lbs) of hazardous industrial solid waste material that has been disposed of and/or stored within your site boundaries and not removed to another site.

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C. Location of Waste Management Facilities and Components

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1. Submit as "Attachment E" a drawn-to-scale topographic map (or other map if a topographic map is unavailable) extending one mile (and only one mile) beyond the property boundaries of the overall plant site, depicting the following:
- a. The approximate boundaries of the site (described in Section II B) and within these boundaries, the location and boundaries of the areas occupied by each active, inactive, and proposed facility component (see Tables III-2 and III-3 for facility components). Each depicted area should be labeled to identify the facility component(s), component status (i.e., active, inactive, or proposed), and area size in acres.

Table III-3 Inactive Hazardous Industrial Solid Waste Management Facility Components

Indicate the inactive facility components which were used for storage/processing/disposal of hazardous wastes or mixtures containing any hazardous waste by entering the number of such facility components in the space provided.

- | | |
|--|--|
| <input type="checkbox"/> Lagoon/Pond (unlined) | <input type="checkbox"/> Landfarm |
| <input type="checkbox"/> Lagoon/Pond (lined) | <input type="checkbox"/> Landspreading Area |
| <input type="checkbox"/> Basin (earthen, above-grade lined) | <input type="checkbox"/> Spray Irrigation Area |
| <input type="checkbox"/> Basin (earthen, above-grade unlined) | <input type="checkbox"/> Flood Irrigation Area |
| <input type="checkbox"/> Basin (earthen, below-grade lined) | <input type="checkbox"/> Septic Tank/Drain Field |
| <input type="checkbox"/> Basin (earthen, below-grade unlined) | <input type="checkbox"/> Injection Well |
| <input type="checkbox"/> Basin (concrete, above-grade lined) | <input type="checkbox"/> Tank (surface storage) |
| <input type="checkbox"/> Basin (concrete, above-grade unlined) | <input type="checkbox"/> Tank (sub-surface storage) |
| <input type="checkbox"/> Basin (concrete, below-grade lined) | <input type="checkbox"/> Tank (surface processing) |
| <input type="checkbox"/> Basin (concrete, below-grade unlined) | <input type="checkbox"/> Tank (sub-surface processing) |
| <input type="checkbox"/> Basin (other) | <input type="checkbox"/> Tank (other) |
| <input type="checkbox"/> Pit (lined) | <input type="checkbox"/> Drum Storage Area (open) |
| <input type="checkbox"/> Pit (unlined) | <input type="checkbox"/> Drum Storage Area (enclosed) |
| <input type="checkbox"/> Incinerator | <input type="checkbox"/> Drum Storage Area (other) |
| <input type="checkbox"/> Open Controlled Incineration Area | <input type="checkbox"/> Bulk Storage Area (open) |
| <input type="checkbox"/> Boiler (energy-producing) | <input type="checkbox"/> Bulk Storage Area (enclosed) |
| <input type="checkbox"/> Landfill (sanitary) | <input type="checkbox"/> Bulk Storage Area (other) |
| <input type="checkbox"/> Landfill (surface, open) | <input type="checkbox"/> Other (specify _____) |
| <input type="checkbox"/> Landfill (other) | _____) |

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Table III-4 Hazardous Waste Facility Components List

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Facility Component		Status			Design Capacity			Number of Years Utilized	Date in Service
Name	TDWR Seq. No.	Inactive	Active	Proposed	(cu yds)	(gal)	(lbs)		
Basin (unlined)	3		X		4,951	1,000,000	7,200,000	3	June, 80
Verbal Description: <u>Oxidation Pond - Utilized for the purpose of storage for seal water and coolant water for the plant operation. Also, utilizes as a bacteria bed propagation.</u>									
Pit (lined)	2		X		737.	148,852	1,041,964	3	June, 80
Verbal Description: <u>Series of concrete pits utilized to separate creosote from make up water coupled to a iration pit which is used for bacteria propagation</u>									
Tank surface processing	1		X		29.70	6,000	43,200	3	June, 80
Verbal Description: <u>Preheating devise used to preheat make up water for treating process coupled with a water creosote seperator</u>									
Verbal Description: _____									
Verbal Description: _____									
Verbal Description: _____									
Verbal Description: _____									

- b. The overall facility and all surface intake and discharge structures;
 - c. All injection wells where liquids are injected underground;
 - d. All known monitor wells and boreholes within the property boundaries of the overall plant site; and
 - e. All wells, springs, other surface water bodies, and drinking water wells within the map area and the purpose for which each water well is used (e.g., domestic, livestock, agricultural, industrial, etc.).
2. Submit as "Attachment F" photographs which clearly delineate all hazardous waste facility structures and storage, processing, and disposal areas, as well as sites of future storage, processing, and disposal areas.

D. Flow Diagram/Description

Show as "Attachment G" process flow diagrams or step-by-step word descriptions of the process flow, depicting the handling, collection, storage, processing, and/or disposal of each of the hazardous wastes previously listed in this application.

The flow diagrams or descriptions should include the following information:

1. Originating point of each waste and waste classification code;
2. Means of conveyance utilized in every step of the process flow;
3. Name and function of each facility component through which the waste passes;
4. The ultimate disposition of all wastes (if off-site, specify "off-site") and waste residues.

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IV. INDEX OF ATTACHMENTS

List and index below all attachments to this application and indicate if included or not included:

<u>Item</u>	<u>Mandatory Attachments</u>	<u>Attachment</u>	<u>Included</u>	<u>Not Included</u>
II.A.5.	USGS map	<u>A</u>	<u>X</u>	—
II.A.6.a.	Affected landowners	<u>B</u>	<u>X</u>	—
II.B.	Site legal description	<u>C</u>	<u>X</u>	—
III.B.1.	Hazardous waste facility component summary sheets	<u>D</u>	—	<u>X</u>
III.C.1.	Facility boundaries and adjacent waters map	<u>E</u>	<u>X</u>	—
III.C.2.	Photographs	<u>F</u>	<u>X</u>	—
III.D.	Process flow diagram/description	<u>G</u>	<u>X</u>	—
<u>Other Attachments as Required</u>				
I.D.2.a.	Lease	—	—	—
III.A.2.	Additional generated waste list (Table III-1)	—	—	—
III.B.3.	Additional hazardous waste facility components list (Table III-4)	—	—	—

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ATTACHMENT "A"

U. S. Geological Survey Map for land use patterns.

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ATTACHMENT B

East Side

- 1) Anne Wilson Stradt
Old Huntington Hwy South of Homer

South Side

- 1) Giles Lowery
Huntington Texas
634-2010
- 2) Zane Blanton
off Hwy 69 South Fuller Springs
824-2500

West Side

- 1) Giles Lowery
Huntington, Texas
634-3010
- 2) Jackie D. Pigg
Ford Chapel Road, Lufkin, Texas
824-2244

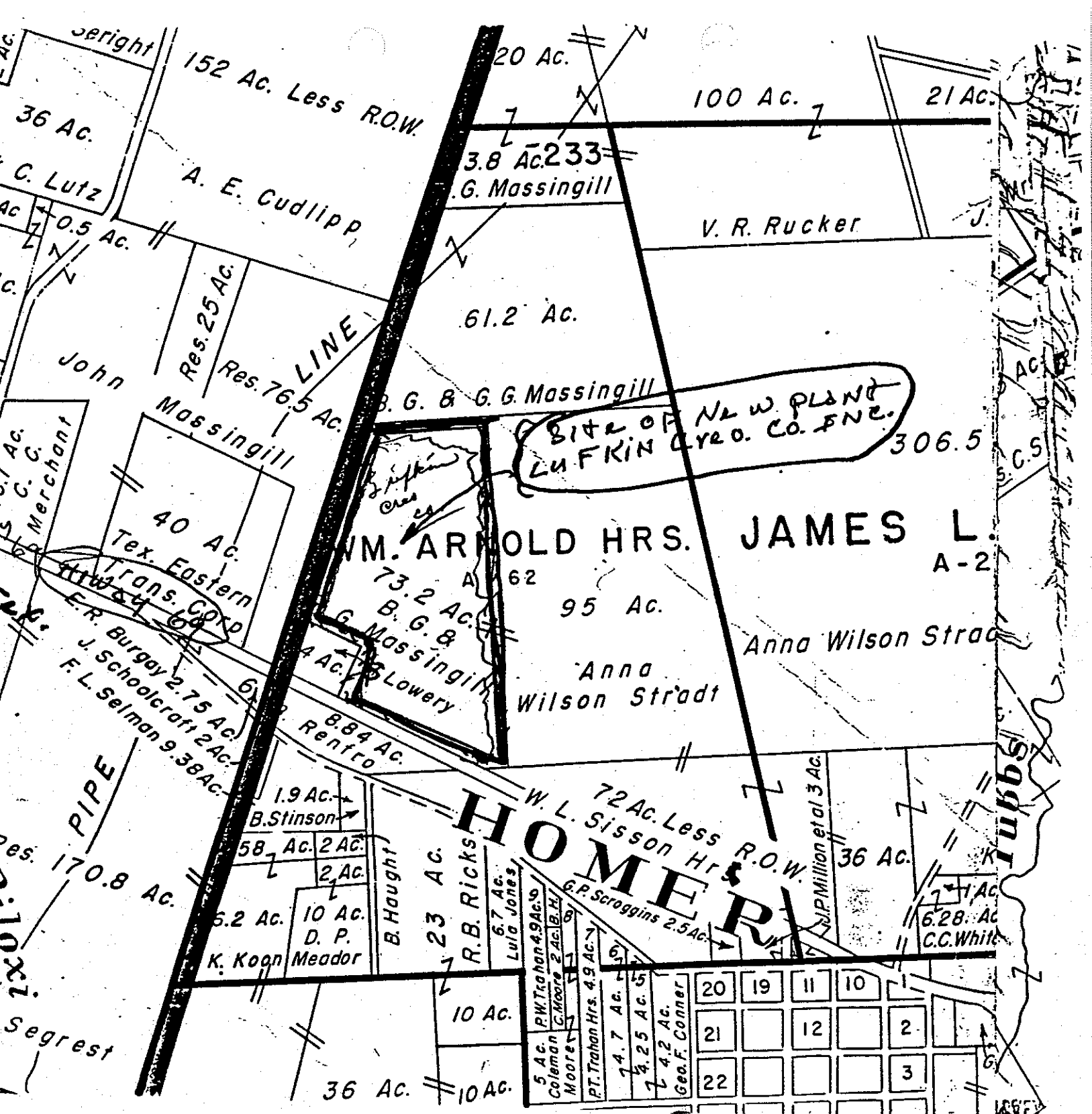
North Side

- 1) Glenn Mossingill
1510 Mickey, Lufkin, Texas
634-4156

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The State of Texas,

County of ANGELINA,

Know All Men by These Presents:

22353

That we, GLENN G. MASSINGILL and wife, FANNIE MASSINGILL,

of the County of Angelina, State of Texas, for and in consideration

of the sum of

----- TEN (\$10.00) ----- DOLLARS

and other valuable consideration,

to us in hand paid by DAN M. VINES, LUFKIN CREOSOTING CO., INC.

as follows:

ALL CASH, the receipt which is hereby acknowledged,

ATTACHMENT "C"

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have Granted, Sold and Conveyed, and by these presents do Grant, Sell and Convey, unto the said

----- DAN M. VINES, LUFKIN CREOSOTING CO., INC. -----

of the County of Angelina, State of Texas, all that certain tract or parcel of land lying and situated in Angelina County, Texas, out of the WILLIAM ARNOLD SURVEY, ABSTRACT NO. 62 and being a part or portion of that certain 77.2 acre tract of land described in a deed from B. G. Massingill et ux to G. G. Massingill et ux dated October 15, 1954 and recorded in Volume 190, on page 220, Deed Records of Angelina County, Texas, and also being all of that certain 0.14 acre tract of land described in a deed from Pauline Basham to Glenn Massingill et ux dated Feb. 25, 1972 and recorded in Volume 385, page 220, Deed Records of Angelina County, Texas, to which referances are hereby made for all purposes and the said tract or parcel of land being described by metes and bounds as follows:

BEGINNING at the N W corner of the aforesaid referred to 77.2 acre tract and the S W corner of that certain 85 acre tract of land described in a deed from B. G. Massingill et ux to G. G. Massingill et ux dated Oct. 15, 1954 and recorded in Volume 190, on page 219, Deed Records of Angelina County, Texas, a $\frac{1}{4}$ " iron pipe set for corner on the West boundary line of the said Arnold Survey;

THENCE S 89 degrees 39' 44" E, (called S 86 deg E in the said 77.2 acre tract deed and called East in the said 85 acre tract deed) with the South boundary line of the said 85 acre tract and the North boundary line of the said 77.2 acre tract, at 1116.19 feet the N E corner of the said 77.2 acre tract, a $\frac{1}{2}$ " iron pin with cap found for corner witnessed by a 14" Pine brg. S 63 degrees E 10.2 feet center and an 8" Pine brg. S 37 degrees E 12.4 feet center;

THENCE S 0 degrees 02' 56" E, with the East boundary line of the said 77.2 acre tract, at 2640.19 feet the S E corner of same and the NE corner of the aforesaid referred to 0.14 acre tract, a $\frac{1}{2}$ " iron pin found for corner witnessed by a 13" Pine brg. N 52 degrees W 12.5 feet center and a " Sweet Gum brg. S 59 degrees E 13.5 feet center;

THENCE S 17 degrees 20' 30" W, with the East boundary line of the said .14 acre tract, at 80.92 feet (called 80.56 feet) the South corner of same a $\frac{1}{2}$ " iron pin found for corner on the N E right-of-way line of U.S. Highway No. 69;

THENCE N 61 degrees 23' 47" W, with the said N E right-of-way line, the S W boundary line of the said 0.14 acre tract and the S W boundary line of the said 77.2 acre tract, at 158.51 feet pass on line the West corner of the said 0.14 acre tract and the S W corner of the said 77.2 acre tract, at 1228.39 feet the South corner of that certain 1 acre tract described in a deed from Glenn Massingill to Herbert Lowery dated July 20, 1967 and recorded in Volume 338, page 269 of the Deed Records of Angelina County, Texas, a 2" iron pipe found for corner;

THENCE N 29 degrees 29' 22" E, with the S E boundary line of the said 1 acre tract, at 524.01 feet (called 521.8 feet) the East corner of same, a 1" iron pipe found for corner;

THENCE N 61 degrees 43' 10" W, (called N 60 degrees 45' W) with the N E boundary line of the said 1 acre tract, the N E boundary line of that certain 1.25 acre tract described in a deed from Glenn Massingill et ux to Reginald Maberry dated Sept. 27, 1963 and recorded in Volume 288, page 241, Deed Records of Angelina County, Texas, the N E boundary line of that certain 1 acre tract of land described in a deed from G. G. Massingill et ux to Herbert Lowery dated Jan. 3, 1962 and recorded in Volume 276, page 145 of the Deed Records of Angelina County, Texas and the N E boundary line of that certain 2.31 acre tract of land described in a deed from Glenn Massingill et ux to Herbert Lowery dated July 20, 1967 and recorded in Volume 338, page 121, Deed Records of Angelina County, Texas, at 839.94

feet (called 843.16 feet) the North or N W corner of the said 2.31 acre tract, a $\frac{1}{2}$ " iron pipe set for corner on the East boundary line of that certain 16.79 acre tract of land described in a deed from Otelia Massingill et al to Herbert Lowery dated June 26, 1967 and recorded in Volume 337, page 344 of the Deed Records of Angelina County, Texas and on the West boundary line of the said Arnold Survey, same being the West boundary line of the said 77.2 acre tract, witnessed by an 18" Red Oak fence corner brg. S 40 degrees 26' W 3.03 feet center;

THENCE two (2) lines with the West boundary line of the said 77.2 acre tract as fenced and the East boundary line of the said 16.79 acre tract as follows:

- (1) N 20 degrees 05' 06" E at 1040.56 feet the N E corner of the said 16.79 acre tract, a 1" iron pipe found for corner;
- (2) N 19 degrees 37' 05" E, at 323.34 feet the point and place of beginning and containing 68.457 acres of land, more or less.

(Field notes prepared by Louis D. Leggett,
Registered Public Surveyor)

RECEIVED

APR 18 1983

PERMIT CONTROL
TDWR

EXHIBIT 4
PLOT OF RELOCATION SITE

SET 1/2" PIPE
N.W. COR.
77.2 AC.

Proposed Re-location
of
Lofkin Creosoting Co., Inc
Plant

RECEIVED

APR 18 1983

PERMIT CONTROL
TDWR

68.457 ACRES

D.M. Vines

1 AC. N. LOWERY
JULY 20, 1967
VOL. 337 PG. 349

SET 1/2" PIPE
18" R.O. 540' 26" W 3.7'

N 61° 43' 10" W

N. LOWERY
2.31 AC.
JULY 20, 1967
VOL. 338
PG. 21

N. LOWERY 1 AC. JUNE 19, 1962
VOL. 276 PG. 169

N. LOWERY 4 AC.
MAR. 29, 1958
VOL. 277 PG. 459

LANDS OF L.S. CO.
SEPT. 17, 1965 VOL. 300 PG. 211
N. LOWERY 1 AC. JUNE 19, 1962
VOL. 276 PG. 169
N. LOWERY 1 AC. JUNE 19, 1962
VOL. 276 PG. 169
N. LOWERY 1 AC. JUNE 19, 1962
VOL. 276 PG. 169

U.S. HWY. 40 & 69

N 61° 23' 47" W

50° 02' 56" E 2,640.19'

A.E.
DEC.

ATTACHMENT E

The effluent recovery and treating system

Red: Blow Down Tank

Black: Separation & Treatment System

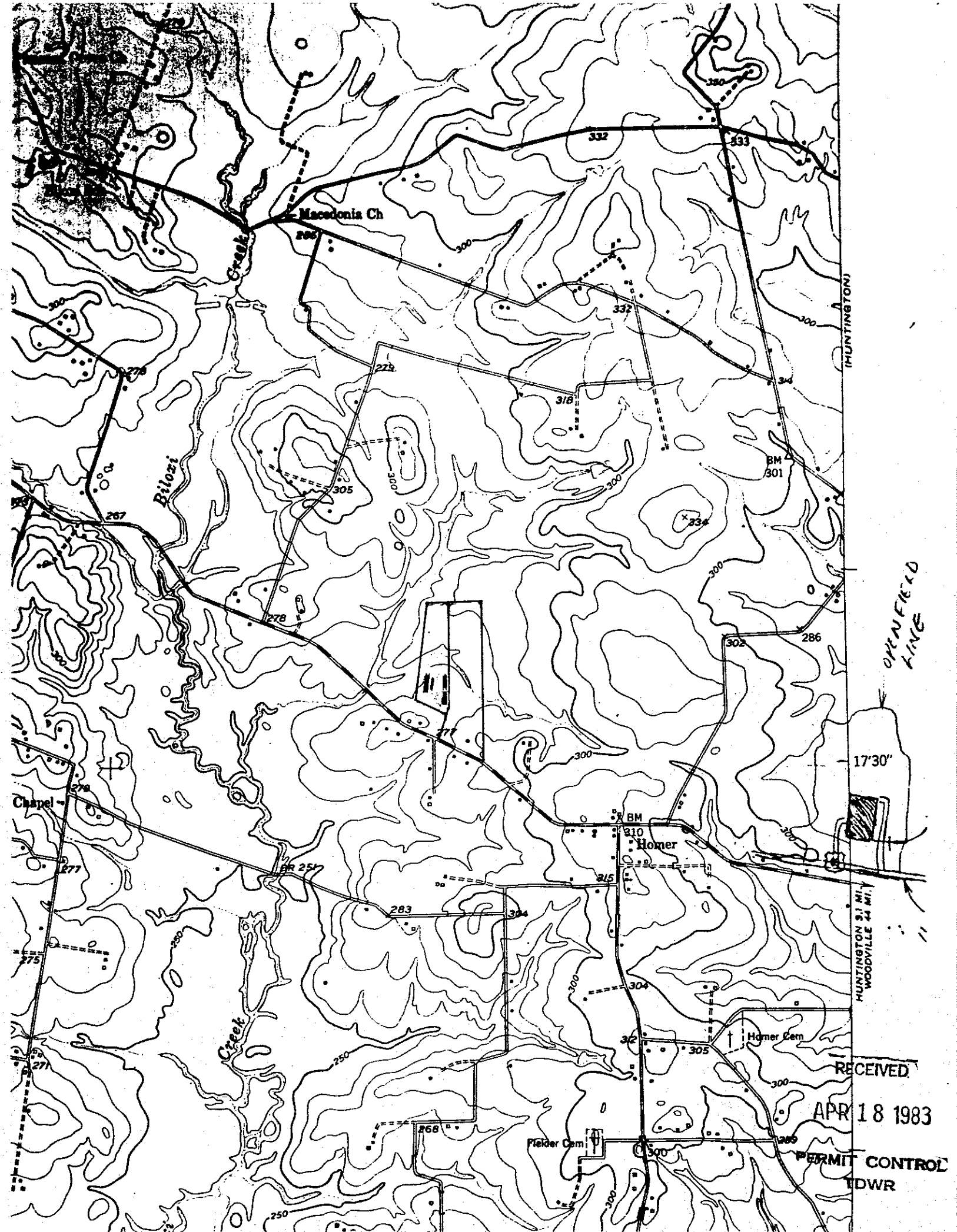
Blue: Oxidation Ponds 1 and 2

Further descriptions of the above processes can be found in Exhibit A.

RECEIVED

APR 18 1983

PERMIT CONTROL
TDWR



ATTACHMENT "F"

Photographs

RECEIVED

APR 18 1966

PERMIT CONTROL
TDWR

FORM 1		U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION <i>Consolidated Permits Program</i> (Read the "General Instructions" before starting.)	I. EPA I.D. NUMBER <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">F</td> <td style="width:10%;">T</td> <td style="width:10%;">X</td> <td style="width:10%;">D</td> <td style="width:10%;">0</td> <td style="width:10%;">0</td> <td style="width:10%;">8</td> <td style="width:10%;">0</td> <td style="width:10%;">6</td> <td style="width:10%;">3</td> <td style="width:10%;">6</td> <td style="width:10%;">6</td> <td style="width:10%;">1</td> <td style="width:10%;"> </td> <td style="width:10%;"> </td> <td style="width:10%;"> </td> </tr> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> <td>7</td> <td>8</td> <td>9</td> <td>10</td> <td>11</td> <td>12</td> <td>13</td> <td>14</td> <td>15</td> <td>16</td> </tr> </table>	F	T	X	D	0	0	8	0	6	3	6	6	1				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
F	T	X	D	0	0	8	0	6	3	6	6	1																							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16																				
LABEL ITEMS I. EPA I.D. NUMBER II. FACILITY NAME FACILITY MAILING ADDRESS FACILITY LOCATION		PLEASE PLACE LABEL IN THIS SPACE	GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.																																

POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column of the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

I. NAME OF FACILITY

SKIP	LUFKIN CREOSOTING COMPANY
------	---------------------------

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
VINES, DANNY VICE PRESIDENT	409 634 5075

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX	B. CITY OR TOWN	C. STATE	D. ZIP CODE
P.O. BOX 1207	LUFKIN	TX	75901

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER				D. STATE		E. ZIP CODE		F. COUNTY CODE (if known)	
HWY 69 5 MI E OF LOOP 287				TX		75901			
B. COUNTY NAME									
ANGELINA									
C. CITY OR TOWN									
LUFKIN									

VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND														
7	2	4	9	1	(specify)	WOOD PRESERVING					7				(specify)									
15	16	17	18	19											15	16	17	18	19					
C. THIRD										D. FOURTH														
7					(specify)						7				(specify)									
15	16	17	18	19											15	16	17	18	19					

VIII. OPERATOR INFORMATION

A. NAME																														B. Is the name listed in Item VIII-A also the owner?									
LUFKIN CRESOTING COMPANY																														<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO									
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)																														D. PHONE (area code & no.)									
F = FEDERAL S = STATE P = PRIVATE										M = PUBLIC (other than federal or state) O = OTHER (specify)										P (specify) Private										4 0 9 6 3 4 5 0 7 5									
E. STREET OR P.O. BOX																																							
P.O. BOX 1207																																							
F. CITY OR TOWN																				G. STATE					H. ZIP CODE					IX. INDIAN LAND									
LUFKIN																				TX					75901					Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO									
15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30																				40 41 42 43 44 45 46 47 48 49 50 51					52 53 54 55 56 57 58 59 60														

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)															D. PSD (Air Emissions from Proposed Sources)														
9 N															9 P														
15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30															15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30														
B. UIC (Underground Injection of Fluids)															E. OTHER (specify)														
9 U															9 R - 8262 (specify) TACB OPER. PERMIT														
15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30															15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30														
C. RCRA (Hazardous Wastes)															E. OTHER (specify)														
9 R															9 (specify)														
15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30															15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30														

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Wood preserving by pressure treating with creosote.

See attached processing description.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)															B. SIGNATURE															C. DATE SIGNED									
Danny Vines, Vice President																														05-02-84									

COMMENTS FOR OFFICIAL USE ONLY

FACILITY MANAGEMENT PLAN

Facility Name Lufkin Creosoting Company ID# TXD008063661

BACKGROUND

Location No. side U.S. Hwy 69 Lufkin, TX Commercial/Manufacturer Wood Preserving Plant

Units to be permitted N/A plan to be small quant. generator

Units to be closed deep unlined surface impoundment, 1 deep concrete tank

Haz wastes managed Sludges - K001.

Status of Closure: Closure of SI began 5/85; submitted petition to delist soils remaining

Part 264 GWM Compliance Status:

RFA Status: PA completed? ☐ SI conducted? ☐

Sampling at facility? ☐

Targeted schedule for necessary corrective actions

Briefly summarize current EPA enforcement actions (Give status and targeted actions)

Consent Order + Agreement in 1985 - operation of hazardous waste storage facility w/out obtaining interim status.

3004(u) or 3008(h) candidate?

Effect of LOIS on facility permitting:

GWM status under Part 265 (include specific actions):

in assessment

Ongoing State enforcement actions affecting permitting:

P
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T



Petromas Incorporated
Engineering & Construction Services
8237 Lockheed
Houston, Texas 77061 713-641-0691

TRANSMITTAL

To: MS. PAMELA PHILLIPS
USEPA
1201 ELM ST.
DALLAS, TX 75270

Job No: _____ Page 1 of 1
Corres. No. _____
Project _____
Location _____
Date MAY 2, 1984

Transmitted herewith are the following:

- | | | |
|---|---|---|
| <input type="checkbox"/> Drawings | <input type="checkbox"/> Specifications | <input type="checkbox"/> Manuals |
| <input type="checkbox"/> Prints | <input type="checkbox"/> Reproducibles | <input type="checkbox"/> Other |
| <input type="checkbox"/> Preliminary | <input type="checkbox"/> Planning only | <input type="checkbox"/> Certified |
| <input type="checkbox"/> For comments | <input type="checkbox"/> For approval | <input type="checkbox"/> As noted |
| <input type="checkbox"/> Please approve and/or make comments and return _____ copies by _____ | <input type="checkbox"/> For construction | <input type="checkbox"/> For your files |

No. Copies	Drawing/Item Number	Rev. No.	Title or Description
1			LETTER TO DANNY VINES
1			EPA PART A, FORMS 1 & 3
1			NOTIFICATION OF HAZARDOUS
			WASTE ACTIVITY
			FORM 8700-12
1			INSPECTION REPORT

Remarks:

J. B. Roach



Petromas Incorporated
Engineering & Construction Services
8237 Lockheed
Houston, Texas 77061 713-641-0691

May 1, 1984

Mr. Danny Vines
Vice President
Lufkin Creosoting Company
P.O. Box 107
Lufkin, TX 75901

Dear Danny:

The attached document contains Petromas' schedule for preparing the necessary paperwork to allow Lufkin Creosoting Company to meet the existing USEPA and TDWR regulations for solid wastes.

You will notice the schedule also includes proposed dates for action by your firm. If you concur with those dates I recommend, you sign the forms where noted and mail them immediately to the USEPA and the TDWR.

This document represents the action plan requested by Ms. Phillips of the USEPA at a April 16, 1984, Dallas meeting attended by Mr. Hearne and me. This plan is due on May 3, 1984.

Very truly yours,


Jerry B. Roach, P.E.
President

JBR/jv/l35

cc: Ms. Pamela Phillips, USEPA, Dallas
Ms. Karen Macko, TDWR, Austin

ANSWER TO US EPA ON VIOLATIONS CITED IN COMPLIANCE ORDER
DATED MARCH 30, 1984
DOCKET NO. RCRA VI 408-H

Paragraph 14:

A revised notification of hazardous waste activity (EPA Form 8700-12) is enclosed.

Paragraph 16:

A part A application package for a hazardous waste permit (Forms 1 and 3) is enclosed.

Paragraph 19:

A waste analysis of the oxididation pond has been made and future analyses will be made under a waste analysis plan to be completed by July 1, 1984.

Paragraph 22:

The 1980 and 1981 annual report for hazard waste activities will be filed by June 1, 1984.

Paragraph 25:

General waste analysis have been performed and will be performed in the future under terms of the waste analysis plan.

Paragraph 28:

Danger signs have been posted. A Texas Department of Water Resources employee verbly acknowledged their adequacy in his recent (April, 84) inspection.

Paragraph 31:

Inspection logs similar to the enclosed form will be printed and in daily use by June 3, 1984. The log sheets constitute a preliminary inspection plan to be further formalized by June 1, 1984.

Paragraph 34:

A personnel training plan will be in place by June 15, 1984, and fully implemented by September 1, 1984.

ANSWER TO CITED VIOLATION Continued
Page 2

Paragraph 37:

A contingency plan will be prepared by June 1, 1984. Any deficiencies in the facility requiring modification will be listed at that time and a time table for necessary corrections furnished to the USEPA and TDWR.

Paragraph 40:

Operating records for the waste water treatment unit will be prepared daily as part of the waste analysis plan and facility inspection plan. Full implementation by July 1, 1984.

Paragraphs 43, 46, 50, 51, 52 and 53:

A plan for the closure of the existing surface impoundment is current under development. The required hydrological and geotechnical study report is due in early May, 1984. Based on verbal information from the geotechnical consultant, we anticipate presentation of the pond closure plan along with the other facilities closure plans by July 1, 1984. Data from the closure will allow the company to determine the proper values for the necessary bonds. The pond closure plan submission date assumes that the geotechnical report contains no surprises. If the date for submission proves impossible, we will notify USEPA and TDWR immediately upon recognizing the problem.

Paragraph 56:

The tank inspections will be performed and reported by using the sheet referred to in the answer to Paragraph 31. Full implementation by June 1, 1984.

2/84

IN DATE

DUNS: 00-806-3661
LUFKIN CREOSOTING CO (INC)

DATE PRINTED
MAR 19 1984

SUMMARY
RATING --

BOX 1207
LUFKIN TX 75901
1411 E LUFKIN
LUFKIN TX 75901
TEL: 409 634-4923

WOOD PRESERVING &
CREOSOTING PLANT

SIC NOS.
24 91

STARTED 1946
PAYMENTS SEE BELOW
EMPLOYS 30
HISTORY CLEAR
FINANCING SECURED

CHIEF EXECUTIVE: DANIEL M VINES SR, PRES

PAYMENTS (Amounts may be rounded to nearest figure in prescribed ranges)

REPORTED	PAYING RECORD	HIGH CREDIT	NOW OWES	PAST DUE	SELLING TERMS	LAST SALE WITHIN
02/84	Ppt	15000	10000	-0-	Regular terms	1 Mo
01/84	Disc	50	-0-	-0-	1 10 N30	4-5 Mos
	Ppt	2500	-0-	-0-	N30	6-12 Mos
	Ppt	500	-0-	-0-	Regular terms	6-12 Mos
	(005)	2500	2500	-0-	2 10 N30	
10/83	Slow 90	500	500	500	N30	
07/83	Ppt	50	50	-0-		

Payment experiences reflect how bills are met in relation to the terms granted. In some instances payment beyond terms can be the result of disputes over merchandise, skipped invoices etc.

FINANCE
01/26/84 On JAN 17 1984 Daniel M Vines Sr, president, declined financial information.
He stated that sales for the fiscal year ended 1983 were even compared to the same period last year. Profit for the period was even and is expected to increase.

PUBLIC FILINGS
UCC FILING
01/26/84 Financing Statement #81-077616 filed 05-07-81 with Secretary, State of TX. Debtor: Lufkin Creosoting Co (Inc), Lufkin, TX. Secured Party: The Citizens State Bank, Corrigan, TX. Collateral: accounts receivable.
01/26/84 Financing Statement #79157568 filed 10-24-79 with Secretary, State of TX. Debtor: Lufkin Creosoting Co (Inc), Lufkin, TX. Secured Party: Lufkin National Bank, Lufkin, TX. Collateral: equipment.

BANKING
01/84 Balances average low five figures. Account opened Feb 1975. Non-borrowing account. Payments as agreed. Relations satisfactory. Loan opened Jun 1980 with medium 5 figures.

HISTORY
01/26/84

DANIEL M VINES SR, PRES+

DANIEL M VINES JR, EX V PRES

ROBERT F FERGUSON, V PRES SALES

BARBARA FERGUSON, SEC

DRAPON VINES, TREAS+

DIRECTOR(S): The officers identified by (+)

Incorporated Texas Mar 31, 1946. Authorized capital consists of 35,000 shares common stock, \$1 par value.

Business started 1946 by Robert E Erwin and Daniel M Vines Sr. 100% of capital stock is owned by Daniel M Vines Sr.

DANIEL M VINES SR born 1925 married. 1942 to 1945 served in U S Army. 1945 to 1946 employed by Texas Electric Co-Op, Lufkin, TX. 1946 to present, active here. Early 1948 became secretary treasurer; Dec 31, 1957 elected vice president. Late 1962 elected president.

DANIEL M VINES JR born 1958. 1979 graduated from Stephen F Austin University. 1977 to present, active here.

ROBERT F FERGUSON born 1951. 1972 to 1980 Finley Tire Co. Lufkin, TX. as owner. Sold that business with all bills paid. 1980 to present, active here.

BARBARA FERGUSON born 1950. 1970 to present active here.

DRAPON VINES born 1926. 1947 to 1962 active as a housewife. 1962 to present active here.

OPERATION
01/26/84

Wood preserving and creosoting plant. Plant has a capacity 3,500 cubic feet every 24 hours.

Terms: Net 30 days. Has 60 accounts. Sells to lumber firms and electric companies. Territory :United States. Nonseasonal.

EMPLOYEES: 30 including officers.

FACILITIES: Owns 2,800 sq. ft. in one story brick building in good condition. Premises neat.

LOCATION: Suburban business section on well traveled street.

03-19(173 /93) 00000 073

Citizens State Bank, Corrigan, TX and First City Bank

FULL DISPLAY COMPLETE



Petromas Incorporated
Engineering & Construction Services
8237 Lockheed
Houston, Texas 77061 713-641-0691

4/2/84 ms

May 10, 1984

Ms. Pamela Phillips
U.S. Environmental Protection Agency
1201 Elm Street
Dallas, TX 75270

Dear Ms. Phillips:

Attached is an amendment to the Hazardous Waste Permit Application Part A, Form 3, for Lufkin Creosoting Company.

The listing of the process code T03 was an error we have just recently discovered.

This amendment corrects the error and we would appreciate your inclusion of the amended page in the original Form 3 of the application.

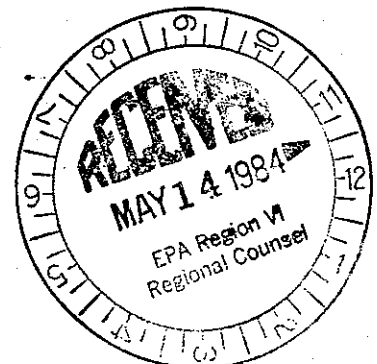
We sincerely regret the error and appreciate your understanding.

Very truly yours,


J. B. Roach, P.E.
President


JBR/jv/135

cc: Ms. Karen Macko
Mr. Danny Vines



(fill-in areas are spaced for elite type, i.e., 12 character-inch).

FORM
1
GENERAL



U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

TXD008063661

D

LABEL ITEMS

EPA I.D. NUMBER

FACILITY NAME

FACILITY MAILING ADDRESS

FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

I. NAME OF FACILITY

SKIP LUFKIN CREOSOTING COMPANY

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
VINES, DANNY VICE PRESIDENT	409 634 5075

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX	B. CITY OR TOWN	C. STATE	D. ZIP CODE
P.O. BOX 1207	LUFKIN	TX	75901

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER	B. COUNTY NAME	C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
HWY 69 5 MI E OF LOOP 287	ANGELINA	LUFKIN	TX	75901	

VII. SIC CODES (4-digit, in order of priority)

A. FIRST 7 4 4 1 (specify) WOOD PRESERVING				B. SECOND			
C. THIRD (specify)				D. FOURTH (specify)			

VIII. OPERATOR INFORMATION

A. NAME NO. LUFKIN CRESOTING COMPANY		B. Is the name listed in Item VIII-A also the owner? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.) F = FEDERAL M = PUBLIC (other than federal or state) S = STATE O = OTHER (specify) P = PRIVATE		D. PHONE (area code & no.) A 4 0 9 6 3 4 5 0 7 5	

E. STREET OR P.O. BOX P.O. BOX 1207		F. CITY OR TOWN LUFKIN		G. STATE TX	H. ZIP CODE 7 5 9 0 1	IX. INDIAN LAND Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
--	--	----------------------------------	--	----------------	--------------------------	--	--

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water) 9 N		D. PSD (Air Emissions from Proposed Sources) 9 P		E. OTHER (specify) R - 8 2 6 2 (specify) TACB OPER. PERMIT	
B. UIC (Underground Injection of Fluids) 9 U		E. OTHER (specify) R - 8 2 6 2 (specify)			
C. RCRA (Hazardous Wastes) 9 R		E. OTHER (specify) (specify)			

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Wood preserving by pressure treating with creosote.
See attached processing description.


XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print) Danny Vines, Vice President	B. SIGNATURE <i>Danny Vines</i>	C. DATE SIGNED 05-02-84
--	------------------------------------	-----------------------------------

COMMENTS FOR OFFICIAL USE ONLY

C	
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FORM 3 RCRA				U.S. ENVIRONMENTAL PROTECTION AGENCY HAZARDOUS WASTE PERMIT APPLICATION Consolidated Permits Program (This information is required under Section 3005 of RCRA.)		I. EPA I.D. NUMBER FTXD0080636611																																					
FOR OFFICIAL USE ONLY																																											
APPLICATION APPROVED		DATE RECEIVED (yr., mo., & day)		COMMENTS																																							
23		24		20																																							
II. FIRST OR REVISED APPLICATION																																											
Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.																																											
A. FIRST APPLICATION (place an "X" below and provide the appropriate date)																																											
<input checked="" type="checkbox"/> 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)				<input type="checkbox"/> 2. NEW FACILITY (Complete item below.)																																							
71				71																																							
<table border="1"><tr><td>YR.</td><td>MO.</td><td>DAY</td></tr><tr><td>79</td><td>06</td><td>19</td></tr></table> FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)				YR.	MO.	DAY	79	06	19	<table border="1"><tr><td>YR.</td><td>MO.</td><td>DAY</td></tr><tr><td></td><td></td><td></td></tr></table> FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN				YR.	MO.	DAY																											
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B. REVISED APPLICATION (place an "X" below and complete Item I above)																																											
<input type="checkbox"/> 1. FACILITY HAS INTERIM STATUS				<input type="checkbox"/> 2. FACILITY HAS A RCRA PERMIT																																							
72				72																																							
III. PROCESSES - CODES AND DESIGN CAPACITIES																																											
A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).																																											
B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.																																											
1. AMOUNT - Enter the amount.																																											
2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.																																											
<table border="1"><thead><tr><th>PROCESS</th><th>PRO-CESS CODE</th><th>APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY</th></tr></thead><tbody><tr><td colspan="3">Storage:</td></tr><tr><td>CONTAINER (barrel, drum, etc.)</td><td>S01</td><td>GALLONS OR LITERS</td></tr><tr><td>TANK</td><td>S02</td><td>GALLONS OR LITERS</td></tr><tr><td>WASTE PILE</td><td>S03</td><td>CUBIC YARDS OR CUBIC METERS</td></tr><tr><td>SURFACE IMPOUNDMENT</td><td>S04</td><td>GALLONS OR LITERS</td></tr><tr><td colspan="3">Disposal:</td></tr><tr><td>INJECTION WELL</td><td>D79</td><td>GALLONS OR LITERS</td></tr><tr><td>LANDFILL</td><td>D80</td><td>ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER</td></tr><tr><td>LAND APPLICATION</td><td>D81</td><td>ACRES OR HECTARES</td></tr><tr><td>OCEAN DISPOSAL</td><td>D82</td><td>GALLONS PER DAY OR LITERS PER DAY</td></tr><tr><td>SURFACE IMPOUNDMENT</td><td>D83</td><td>GALLONS OR LITERS</td></tr></tbody></table>								PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	Storage:			CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	S02	GALLONS OR LITERS	WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	Disposal:			INJECTION WELL	D79	GALLONS OR LITERS	LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER	LAND APPLICATION	D81	ACRES OR HECTARES	OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY	SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
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EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.																																											
<table border="1"><thead><tr><th>LINE NUMBER</th><th>A. PRO-CESS CODE (from list above)</th><th>B. PROCESS DESIGN CAPACITY</th><th>FOR OFFICIAL USE ONLY</th></tr><tr><th></th><th></th><th>1. AMOUNT (specify)</th><th>2. UNIT OF MEASURE (enter code)</th></tr></thead><tbody><tr><td>X-1</td><td>S02</td><td>600</td><td>G</td></tr><tr><td>X-2</td><td>T03</td><td>20</td><td>E</td></tr><tr><td>1</td><td>S02</td><td>160,000</td><td>G</td></tr><tr><td>2</td><td>T01</td><td>111,000</td><td>G</td></tr><tr><td>3</td><td>T02</td><td>1.2</td><td>A</td></tr><tr><td>4</td><td>T03</td><td>53,000</td><td>G</td></tr></tbody></table>								LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY			1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)	X-1	S02	600	G	X-2	T03	20	E	1	S02	160,000	G	2	T01	111,000	G	3	T02	1.2	A	4	T03	53,000	G				
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4	T03	53,000	G																																								

Continued from page 2.

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY														
S W T X D 0 0 8 0 6 3 6 6 1 1 1 2 13 14 15													S W DUP 1 2 13 14 15 23 24 25 26														
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																											
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																				
	23	24	25	26			1. PROCESS CODES (enter)																				
	23	24	25	26	27	35	27	28	27	28	27	28	27	28	27	28	27	28	27	28	27	28	27	28	27	28	
1	U	0	5	1	1,200	P	S	0	2	D	8	0															Off site commercial land fill
2	K	0	0	1	20,000	P	T	0	1	D	8	0															Off site commercial land fill
3	K	0	0	1	-0-	P	T	0	2	D	8	3															Used in the past
4																											
5																											
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IV. DESCRIPTION OF HAZARDOUS WASTES (continued)**E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.**

EPA I.D. NO. (enter from page 1)

S	F	T	X	D	0	0	8	0	6	3	6	6	1	T/A	C
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

3	1	1	7	4	5
55	56	57	58	59	60

9	4	3	8	5	0
72	73	74	75	76	77

VIII. FACILITY OWNER☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

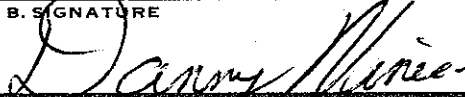
IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

Danny Vines, Vice President
Lufkin Creosoting Company

B. SIGNATURE



C. DATE SIGNED

May 2, 1984

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

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